

Posttest

If you wish to receive continuing education credit for this program, you must complete this posttest. Each question below contains five suggested answers, of which one or more is correct. Choose all correct answers for each question.

- 29. The main source of internal contamination with I-131 near a nuclear release is**
- (A) air.
 - (B) water.
 - (C) vegetables.
 - (D) milk.
 - (E) dietary products.
- 30. What age or functional group is most sensitive to thyroid disease after I-131 exposure?**
- (A) Pregnant women between 25 and 40 years old.
 - (B) Elderly persons (older than 65 years old).
 - (C) Children younger than 5 years old.
 - (D) School-aged athletes who practice outdoors.
 - (E) Women between 14 and 44 years old.
- 31. The thyroid dose of I-131 due to milk consumption is elevated**
- (A) when people drink fresh cow's milk.
 - (B) when people drink fresh goat's and sheep's milk.
 - (C) in an area with an iodine-deficient diet.
 - (D) when people eat dairy products.
 - (E) when people are inhaling the contaminated air.
- 32. What is the initial test for screening a patient for the noncancerous effects of I-131?**
- (A) Ultrasound imaging.
 - (B) Serum TSH level.
 - (C) Serum antithyroglobulin antibody level.
 - (D) Serum antithyroid peroxidase antibody level.
 - (E) FNAB.

33. **Once a nodule has been identified, how can we determine whether it is solid, cystic, or both?**
- (A) Ultrasound imaging.
 - (B) Radionuclide scan.
 - (C) Surgical resection.
 - (D) Repeat ultrasound imaging.
 - (E) FNAB.
34. **After careful examination, a thyroid nodule is found. Ultrasound imaging shows that the nodule is solid. What should be the next diagnostic test?**
- (A) T4 suppression challenge.
 - (B) FNAB.
 - (C) Surgical resection.
 - (D) Radionuclide scan.
 - (E) Repeat ultrasound imaging.
35. **Ultrasound imaging reveals that a thyroid nodule is a complex cyst. What diagnostic test should be performed next?**
- (A) Radionuclide scan.
 - (B) FNAB.
 - (C) Surgical resection.
 - (D) Serum TSH level.
 - (E) Repeat ultrasound imaging.
36. **A patient who was exposed to a significant dose of I-131 years ago has a thyroid nodule and undergoes FNAB. The cytology report is “nondiagnostic.” What should be recommended next to this patient?**
- (A) T4 suppression challenge.
 - (B) Repeat FNAB.
 - (C) Surgical resection.
 - (D) Radionuclide scan.
 - (E) Follow-up ultrasound imaging.
37. **The results of repeated FNAB of a thyroid nodule is reported by an experienced pathologist to be “nondiagnostic.” What should be recommended next to this patient?**
- (A) T4 suppression challenge.
 - (B) FNAB.
 - (C) Surgical resection.
 - (D) Radionuclide scan.
 - (E) Repeat ultrasound imaging.

38. **Ultrasound imaging reveals that a thyroid nodule is a simple cyst. What should be the next diagnostic test performed?**
- (A) T4 suppression challenge.
 - (B) FNAB.
 - (C) Surgical resection.
 - (D) Radionuclide scan.
 - (E) Repeat ultrasound imaging.
39. **What is the most efficient way of evaluating whether a thyroid nodule is malignant?**
- (A) Thorough physical examination, radionuclide scan, FNAB, and surgical resection.
 - (B) Brief history, physical examination, ultrasound imaging, and radionuclide scan.
 - (C) Thorough history, careful physical examination, FNAB, and cytologic interpretation by experienced pathologist.
 - (D) Serum TSH level, serum antithyroglobulin antibody level, and serum antithyroid peroxidase antibody level.
 - (E) Serum TSH level, ultrasound imaging, and FNAB.
40. **The following measures are needed immediately after a nuclear release occurs:**
- (A) Informing the population about the risks from exposure to I-131.
 - (B) Treatment with KI.
 - (C) Shutting doors and windows.
 - (D) Forbidding fresh milk consumption.
 - (E) Thyroid screening.

Note to Nurses

CDC is accredited by the American Nurses Credentialing Center's (ANCC) Commission on Accreditation. ANCC credit is accepted by most State Boards of Nursing.

California nurses should write in "ANCC - Self-Study" for this course when applying for relicensure. A provider number is **not** needed.

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